



BUSINESS ASSOCIATION SPECIAL EVENT PROPOSAL FOR TOWN SPONSORSHIP

EVENT TITLE Concourse on Worth Avenue **EVENT DATE** December 8th, 2019

SECTION 1: CONTACT INFORMATION	
Business Association	Worth Avenue Association
Representative Name	Faith Spencer
E-Mail Address	Faith@worth-Avenue.com
Mailing Address	256 worth avenue suite 310 Palm Beach, FL
Primary Telephone	5618439554
Secondary Telephone	
Fax Number	
SECTION 2: EVENT INFORMATION	
Event Location	South Side of the 100,200, &300 Blocks of Worth Avenue
Event Admission Fee	<input type="checkbox"/> Yes, Amount _____ <input checked="" type="checkbox"/> XNo
Anticipated Attendance	200-250 guests
Event Time	From:10am To:2pm
Event Set Up	Date:9am Time:10am
Event Dismantle	Date:2pm Time:3pm
Event Description	Classic and Exotic Automobiles Event on the South side of WORTH AVENUE. Retail stores will have experts from Ferrari, Maserati, Bentley, Lamborghini etc.. The event is in place to generate excitement from town residence and assist retailers with foot traffic after a slow summer.

Is this event part of a larger marketing campaign? If yes, please describe.

NO

Public Inquiries Contact (Name, Telephone and E-Mail Required)	
Are you requesting any street and/or sidewalk closures?	If yes, specify street and/or sidewalks and time of closures. Yes, South side of Worth Avenue 100, 200 & 300 BLK
Does your event include food concessions? (No On-Site Cooking Permitted)	Anticipated Number of Vendors: one
Does your event involve the sale or consumption of alcoholic beverages? NO	If yes, please check all that apply: NO <input type="checkbox"/> Free Alcohol <input type="checkbox"/> Alcohol Sales <input type="checkbox"/> Distilled Spirits <input type="checkbox"/> Beer <input type="checkbox"/> Wine If alcohol is sold at an event, the applicant is required to obtain a temporary liquor license from the Division of Alcoholic Beverages and Tobacco. Copy of temporary liquor license must be provided to Town prior to event date. Additional insurance requirements and police enforcement will be required.
Does your event require amplified sound and/or music? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If yes, please check all that apply: NO <input type="checkbox"/> Amplified sound for announcements only <input type="checkbox"/> Amplified sound for recorded music <input type="checkbox"/> Amplified sound for live music Approval of a Special Event Proposal does not necessarily exempt the planned event from the requirements of the Town of Palm Beach's Noise Ordinance.
Will you be installing any temporary signage? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If yes, list number, description and location: Compliance with Section 134-2371 of the Town of Palm Beach Code of Ordinances is required.
Do you plan to provide portable comfort stations at your event? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If yes, how many stalls will be in each station: _____ <input type="checkbox"/> Yes <input type="checkbox"/> No Is comfort station ADA accessible? If not providing, provide information as to availability of restroom facilities in the immediate area of the event site that will be available to the public, include ADA accessible and non-ADA accessible.

<p>Will you be installing any temporary structures?</p> <p><input type="checkbox"/> Yes</p> <p><input checked="" type="checkbox"/> No</p>	<p>If yes, identify number and size of tents & canopies:</p> <hr/> <p>Delivery Date: _____ Removal Date: _____</p> <p>Stage/Platform/Riser Dimensions:</p> <p>Length: _____ Width: _____ Height: _____</p> <hr/> <p>Delivery Date: _____ Removal Date: _____</p> <p>Vendors will be required to provide a certificate of commercial general liability insurance in an amount to be determined by the Town, listing the Town of Palm Beach as additional insured. Permits may be required.</p>
<p>Will funds be solicited for any charities?</p> <p><input type="checkbox"/> Yes</p> <p><input checked="" type="checkbox"/> No</p>	<p>If yes, list charities:</p> <p>A Charitable Solicitation Permit must be submitted no less than 60 days prior to event date in addition to this proposal form.</p>
<p>Will this event utilize a generator(s)</p> <p><input type="checkbox"/> Yes</p> <p><input checked="" type="checkbox"/> No</p>	<p>If yes, list the number and size of each:</p>
<p>Site Plan</p>	<p>Please include a complete site plan of the proposed event, including:</p> <ul style="list-style-type: none"> • An outline of the event site including the names of the streets or areas that are part of the venue and the surrounding area. • Any street or lane closure requests. • The locations of fencing, barriers and/or barricades. Include any removable fencing for emergency access. • Vehicular access. • Pedestrian access. • Location of stages, platforms, risers, canopies, tents, comfort stations, dumpsters and any other temporary structures. • Generator locations and/or source of power. • Placement of vehicles and/or trailers. • Anticipated parking locations. • Vendor locations. • Temporary signage locations. • Locations of all other event activities.

**FOR OFFICIAL USE ONLY
DEPARTMENT REVIEW**

Recreation

Reviewer: _____

Approved

Date: _____

Approved w/Comments:

Rejected w/ Comments:

Police

Reviewer: _____

Approved

Date: _____

Approved w/Comments:

Rejected w/ Comments:

Fire Rescue

Reviewer: _____

Approved

Date: _____

Approved w/Comments:

Rejected w/ Comments:

Public Works

Reviewer: _____

Approved

Date: _____

Approved w/Comments:

Rejected w/ Comments:

Planning, Zoning & Building

Reviewer: _____

Approved

Date: _____

Approved w/Comments:

Rejected w/ Comments:

Town Manager's Office

Reviewer: _____

Approved

Date: _____

Approved w/Comments:

Rejected w/ Comments:

- After final Department review, please return to the Recreation Department.